FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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OMB APPROVAL

PROCESSED

TEMPORARY FORM D

MAR 37 2009

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, THOMSON REUTERS SECTION 4(6), AND/OR LIMITED OFFERING EXEMPTION

SEC USE	ONLY
Prefix	Serial
DATE REC	CEIVED

Name of Offering: PRICE CAPITAL FUNI	A, L.P Offerin	g of Limited Part	nership Intere	ests	\\\ <u>\</u>	Mail Processing
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	☐ Section 4(6)		Section
Type of Filing:	☐ New Filing	☑ Amendment				!! <u>- 2 annn</u>
	A. B.	ASIC IDENTIFICA	TION DATA		11/	W 12 2009
1. Enter the information requested about the is	suer					
Name of Issuer (check if this is an am	endment and name ha	s changed, and indica	ite change.)		VV	เบิกเกgton, DC
PRICE CAPITAL FUND A, L.P.						111
Address of Executive Offices	(Number	and Street, City, State	e, Zip Code)	Telephone Number (In	cluding Area Code)	
2215 B Renaissance Drive, Suite 5, Las Vegas	-	. •	• •	(866).934.6300	·	
Address of Principal Business Operations		and Street, City, State	e, Zip Code)	Telephone Number	-ludina Area Code)	
(if different from Executive Offices)		•	• •			
Brief Description of Business: To operate a	s a private investr	nent limited partn	ership.	·		(1919 HAM 1990 HEAL
Type of Business Organization						
☐ corporation	★ limited partner	rship, already formed	□ o	ther (please speci		MULUES ALCIEU 17
□ business trust	☐ limited partner	ship, to be formed				
Actual or Estimated Date of Incorporation or O	rganization:	Month 0 6		0 K Actual	☐ Estimated	
Jurisdiction of Incorporation: (Enter two-letter CN for Canada	U.S. Postal Service A la; FN for other foreig			D	E	

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENT	IFICATION DATA	-		
2. Enter the informatio	n requested for the fol					
	-	nas been organized within the p	past five years;			
Each beneficial own	er having the power to	o vote or dispose, or direct the	vote or disposition of, 10% or	more of a class of eq	uity sec	urities of the issuer;
Each executive office	er and director of con	porate issuers and of corporate	general and managing partners	of partnership issue	ers; and	
Each general and ma	inaging partner of par	tnership issuers.				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	X	General and/or Managing Partner
Full Name (Last name first, if it	ndividual)					
PRICE ASSET MANAGEME	NT, INC. (the "Gene	eral Partner" or "GP")				<u> </u>
Business or Residence Address	(Number and Street	, City, State, Zip Code)				
2215 B Renaissance Drive, Sui	te 5, Las Vegas, Neva	da 89119				
Check Box(es) that Apply:	➤ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	X	General and/or Managing Partner
Full Name (Last name first, if in	ndividual)					
PRICE, MICHAEL (President	of the General Partne	or)				
Business or Residence Address						
c/o Price Asset Management, In	ec 2215 B Renaissan	ce Drive Suite 5 Lac Venas N	Jeveral 80110			
Check Box(es) that Apply:	▼ Promoter	Beneficial Owner	Executive Officer	☐ Director		General and/or
						Managing Partner
Full Name (Last name first, if in	ndividual)		· · · · · · · · · · · · · · · · · · ·			
Lyons, Dexter						
Business or Residence Address	(Number and Street	, City, State, Zip Code)				
106 Valerie Drive, Lafayette, L	ouisiana 70508					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if in	ndividual)					
						<u> </u>
Business or Residence Address	(Number and Street	, City, State, Zip Code)				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if in	ndividual)				-	(vianaging 1 articl
(··,					
Business or Residence Address	(Number and Street	, City, State, Zip Code)				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if in	ndividual)					
Business or Residence Address	(Number and Street	, City, State, Zip Code)				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if in	ndividual)					
Business or Residence Address	(Number and Street	, City, State, Zip Code)				

	, ,				B. i	NFORM	ATION A	BOUT OI	FFERING	;	-			
							•						Yes	No
1.	Has the issuer	sold, or de	es the issue	er intend to							.,,		🗖	X
	Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?									£1.000	000 +			
2.	what is the m	inimum in	vestment th	at will be a	ccepted fro	m any indi	vidual?		**************			************	\$ <u>1,000,</u> Yes	No
*(4	inv lesser an	ount is a	it the sole	discretie	on of the	General .	Partner.)						163	140
3.	*(Any lesser amount is at the sole discretion of the General Partner.) 3. Does the offering permit joint ownership of a single unit?									X				
4.	Enter the info		-	-	-									
••	solicitation of registered wit a broker or de	f purchaser h the SEC	s in connec and/or with	tion with s a state or s	sales of sec tates, list th	urities in the name of	he offering the broker	. If a perso or dealer. I	on to be lis	ted is an as	ssociated p	erson or age	ent of a broke	er or dealer
Full	Name (Last na	me first, if	individual)											
NO	NE													
	iness or Resider	nce Addres	s (Number	and Street,	City, State,	Zip Code)								
Nan	ne of Associated	Broker or	Dealer											
Stat	es in Which Per	rson Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	s						-	
	(Check "All S	tates" or cl	heck individ	lual States)			************						□ Ail S	tates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL] [MT]	(IN)	[lA] [NV]	[KS] [NH]	[KY]	[LA] [NM]	(ME) [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
	[RI]	[SC]	[SD]	[TN]	[KJ] [TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full	Name (Last na	me first, if	individual)											
Bus	iness or Reside	nce Addres	s (Numbe	r and Street	t, City, Stat	e, Zip Code	e)				•		· -	-
Nan	ne of Associated	i Broker or	Dealer		.	 						_		
		J Diokei Oi	Dealer											
Stat	es in Which Per	rson Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	\$							
	(Check "All S	tates" or cl	heck individ	lual States)						••••		.,,,,,,	🗖 All S	tates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	(KY)	[LA]	[ME]	(MD)	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	(NJ) [TX]	[NM] [UT]	[VY] [VT]	[NC] [VA]	[ND] [WA]	(OH) [WV)	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full	Name (Last na						<u>.</u>							
Bus	iness or Resider	nce Addres	s (Numbe	r and Street	i, City, Stat	e, Zip Code	e)							
Nan	ne of Associated	Broker or	Dealer			 	- 							<u></u>
Stat	es in Which Per	son Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	s				<u>-</u>	 .		
	(Ch∞k "All S												🗖 All S	tates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	(ID)	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	(SD)	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold.	OF PROCE	EDS	· · · · · · · · · · · · · · · · · · ·
	Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Pric		Amount Already Sold (2)
	Debt	s		\$
	Equity	\$	 '	S
	☐ Common ☐ Preferred	· · · · · · · · · · · · · · · · · · ·		
	Convertible Securities (including warrants)	\$		s
	Partnership Interests	\$750,000,00	20	\$8,689,642
	Other (specify)	\$ <u>750,000,00</u>	<u> </u>	\$
	Total	\$750,000,00	20	\$8,689,642
	Answer also in Appendix, Column 3, if filing under ULOE.	# <u>750,000,00</u>	<u> 70</u>	30,007,042
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number investors (Aggregate Dollar Amount of Purchases (2)
	Accredited Investors	19		\$ <u>8,689,642</u>
	Non-accredited Investors	0		s o
	Total (for filings under Rule 504 only)	N/A		\$N/A
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
	Type of offering	a		Dollar Amount
	Rule 505	Type of Secu <u>N/A</u>		Sold \$ <u>N/A</u>
	Regulation A	N/A		\$N/A
	Rule 504	N/A N/A		\$ <u>N/A</u> \$ N/A
	104			<u> </u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	.,	\boxtimes	\$ <u>-0-</u>
	Printing and Engraving Costs		\mathbf{X}	\$ 2,000
	Legal Fees		X	\$_20,000
	Accounting Fees	*********	X	\$ 8,000
	Engineering Fees.	*********	X	\$ <u>-0-</u>
	Sales Commissions (specify finders' fees separately)		×	\$ -0-
	Other Expenses (identify) Blue Sky filing fees		<u> </u>	\$ -0-
	Total		\boxtimes	\$ 30,000 (3)
				
(2)	Open-end fund. The maximum aggregate offering price is estimated solely for the purpose of this filing. The number of investors may include sales to U.S. and non-U.S. persons. Reflects an estimate of initial costs only.	g. 		

C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AND US	E OF	PROCEED	S		
total expenses furnished in response to Part C - Q	offering price given in response to Part C - Question I and tuestion 4.a. This difference is the "adjusted gross proceeds	\$ 749,970,000				
the numoses shown. If the amount for any purpos	roceeds to the issuer used or proposed to be used for each of e is not known, furnish an estimate and check the box to the sted must equal the adjusted gross proceeds to the issuer set					
			Payments to Officers, birectors, and Affiliates		Payments to Others	
Salaries and fees		X s	<u>(4)</u>	_ □	\$ _	
Purchases of real estate			S		\$	
Purchase, rental or leasing and installation of mac	hinery and equipment		s _		\$	
Construction or leasing of plant buildings and faci	ilities		s		s	
Acquisition of other businesses (including the value		_	s		\$	
Repayment of indebtedness			\$		\$	
Working capital			s	_ 🗆	s	
Other (specify): Pontfolio Investments			s	<u> </u>	\$ <u>749,970,000</u>	
			\$_ <u>(4)</u>	_ 🗵	\$ <u>749,970,000</u>	
Total Payments Listed (column totals added)		∑\$ <u>749,970,000</u>				
	D. FEDERAL SIGNATURE					
The issuer has duly caused this notice to be signed by the an undertaking by the issuer to furnish to the U.S. Secunon-accredited investor pursuant to paragraph (b)(2) of	the undersigned duly authorized person. If this notice is filed un trities and Exchange Commission, upon written request of its st Rule 502.	nder Ri taff, the	e information	ollowing : furnished	signature constitutes 1 by the issuer to any	
Issuer (Print or Type)	Signature 24/1/2.		Date			
PRICE CAPITAL FUND A, L.P.	Maya		March _	5 ,20	009	
Name of Signer (Print or Type)	Title of Signer (Print or Type)					
BY: PRICE CAPITAL MANAGEMENT, INC., ITS GENERAL PARTNER						
BY: MICHAEL PRICE, PRESIDENT	MICHAEL PRICE, PRESIDENT OF PRICE CAPITAL M PARTNER OF THE ISSUER	IANAC	GEMENT, IN	IC., THE	GENERAL	

(4) The General Partner is entitled to a preferred profit participation. The terms of the preferred profit participation is discussed in greater detail in the Issuer's confidential offering materials.

_		E. STATE SIGNATURE							
				Yes	No				
١.	Is any party described in 17 CFR 230,262 presently	subject to any of the disqualification provisions of such rule?	******						
	5	See Appendix, Column 5, for state response. NOT APPLICABLE							
2.	such times as required by state law.	sh to any state administrator of any state in which this notice is filed,			239.500) a				
3.	The undersigned issuer hereby undertakes to furnis	sh to the state administrators, upon written request, information furnis	hed by the issuer	to offerees.					
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. NOT APPLICABLE								
	e issuer has read this notification and knows the contesson.	ents to be true and has duly caused this notice to be signed on its beha	olf by the undersig	gned duly au	thorized				
İssi	uer (Print or Type)	Signature	Date						
PRICE CAPITAL FUND A, L.P.		MANCE	March_5,	2009					
Na	me (Print or Type)	Title (Print or Type)							
	y: Price Capital Management, Inc., S General Partner								
		MICHAEL PRICE, PRESIDENT OF PRICE CAPITAL MAN	AGEMENT, INC	., THE GE	NERAL				
	Y: MICHAEL PRICE, RESIDENT	PARTNER OF THE ISSUER	ŕ	-					

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

END